BEST AVAILABLE CO.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10081743

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			27					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			27 minus 20=		* 7			X\$ 9=		OR	X\$18=	126.00
INDEPENDENT CLAIMS			6 minus 3 =		* 3			X42=		OR	X84=	252.00
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	1/12
CLAIMS AS AMENDED - PA						(Oak		SMÅLL E	NTITY	OR	OTHER SMALL	
		(Column 1) CLAIMS		(Colui		(Column 3)	i- i	UMALL	ADDI-) 		ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM	BER OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM		J	+140=		OR	+280=	
	ADD										TOTAL	
										On	ADDIT. FEE	
		(Column 1)			mn 2) HEST	(Column 3)	1			1		
œ		REMAINING		NUN	MBER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT		AFTER AMENDMENT			OUSLY FOR	EXTRA		HAIE	FEE		NAIL	FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 0. 4.0.4	=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
		CLAIMS		HIG	HEST				ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						٠		·	lon	-	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR		<u> </u>
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the entry in column 1 is less than the entry in column 3. **TOTAL ADDIT. FEE ADDIT. FEE												
	The Wilsham A					a highest numb		und in the an	nronriate ho	v in c	olumn 1	